

Nebraska Crime Commission

2010 State County Aid Juvenile Justice Grants (LB 640/193/1014 funds)

APPLICATION KIT

**Applications are due in the
Crime Commission Office:**

**February 8, 2010
5:00 PM CST**

NO FAXED OR EMAIL COPIES WILL BE ACCEPTED

No Exceptions

Contact: Jamie Rivera
Nebraska Crime Commission
(402) 471-3989
Jamie.Rivera@nebraska.gov

GENERAL APPLICATION INSTRUCTIONS

Amount Available: Approximately \$1,492,500

All funds will be awarded contingent upon final appropriation from the Legislature. See the table at the end of the instructions for specific county allocations and required documented match. Counties can only apply for the designated amount and should only show the designated amount for match.

Technical Assistance:

For questions regarding the application contact Jamie Rivera at 402-471-3989 or Jamie.Rivera@nebraska.gov.

Eligibility:

Counties are the only eligible applicants. Counties may contract with private or non-profit agencies to administer programs and services with County Aid funds, however, counties can not require contracted agencies to provide the match. Ultimately, the county is responsible for all funds and must follow all requirements and contingences as outlined by the grant. There must also be a current Three Year Juvenile Services Comprehensive Plan in place for the county to receive funds.

Source and Purpose of Funds:

County Aid Juvenile Justice funds are appropriated on an annual basis by the Nebraska Legislature. The purpose of these funds, as outlined in state statute, is to assist communities in the implementation and operation of program or services identified in their Three Year Juvenile Comprehensive Plan, including but not limited to: programs for assessment and evaluation, the prevention of delinquent behavior, diversion, detention, shelter care, intensive juvenile probation services, restitution, family support services, and community centers for the care and treatment of juveniles in need of services.

Funding Limitations:

- A. The Crime Commission does NOT allow grant funds to be used for indirect costs.
- B. Funds are not allowed for construction of any type of youth facilities, capitol construction or lease or acquisition of facilities.
- C. Funds received by an eligible applicant shall NOT be used to replace or supplant any funds currently being used to support existing programs for juveniles.

Comprehensive County Juvenile Services Plans:

For the 2010 application, counties are required to have an updated Three Year Plan on file. No awards will be made to counties that have not met the County Plan Requirement. If a county wishes to apply for the County Aid Grant and has yet to complete a county plan, please contact Jamie Rivera at 402-471-3989 or Jamie.Rivera@nebraska.gov to discuss technical assistance in developing a plan. All current county plans can be found at the Crime Commission website: www.ncc.ne.gov. The Crime Commission contracts with a County Aid Planner to provide technical assistance in developing County plans. The County Planner Julie Rogers with the Juvenile Justice Institute in Omaha can help you in

developing that plan. To contact Julie Rogers please call 402-472-6753 or email her at jlrogers@unomaha.edu .

Counties that do not have a current plan when submitting this grant but are in the process of completing and submitting one must have a letter written by the county plan writer stating where the county is on the planning process for their plan. The letter should include all the steps the county as has taken so far in completing their plan. Example, if they have spoken with the county planner or the Crime Commission, what draft they are on, how many meetings have been completed, etc.

Match:

Per state statute, a 40% match is required. The county can designate the 40% match directly toward the program described in this application, OR the match can be documented new or existing county expenditures for community based programs or services for juveniles. This can include detention costs, out of home placement costs, law enforcement costs for transportation, etc. A county must be able to document match expenditures of 40% of the County Aid allocation. The match must be provided by the county. No in-kind match from service providers or other sources is allowable.

Application Deadline:

Applications are due into the Crime Commission Office by 5:00 p.m. on February 8, 2010.

Faxed or electronic copies will not be accepted. There will not be any exceptions allowed if using mailing service and grants are not delivered to our office by the deadline. Applications **MUST** be received by the deadline in order to be accepted.

Please send the original application and 15 copies to:

Nebraska Crime Commission
301 Centennial Mall South, State Office Building, 5th floor
P.O. Box 94946
Lincoln, NE 68509-4946

Project Period:

The project period for 2010 County Aid dollars will be July 1, 2010 – June 30, 2011.

Reporting:

Applicants will be required to report activities and expenditures by submitting activity summary reports and cash reports on a quarterly basis.

Grant Management Training:

All awarded applicants are required to attend a mandatory Grant Management Training. Awarded applicants will receive notice of the training after the Crime Commission makes final recommendations on May 7, 2010.

Distribution of Funds:

Submitted County Aid applications will be reviewed by the Grant Review Committee in March followed by the Nebraska Coalition for Juvenile Justice's review and recommendations at the March 26, 2010 meeting. Final approval and recommendations will be given at the May 7, 2010 Crime Commission meeting. Applicants will be notified in writing of the approval or denials of the County Aid funds and given instructions for required grant management training and drawing down of funds.

Correspondences:

Please review all correspondence from the Crime Commission to ensure you receive all necessary information about the program. All correspondence will be sent to the person listed as the project director on the application information page.

SPECIFIC SECTION INSTRUCTIONS

Section 1: Applicant Information:

- The Federal I.D. number must be that of the county that is serving as the applicant.
- The "Lead County" is the county acting as the applicant. If a group of counties are pooling their funds, only one county can be designated as the lead county applicant.
- The Project Director will be the individual who is the main point of contact on the grant and will receive all correspondences. The Project Director and Project Coordinator can be the same person. The Fiscal Officer **MUST** be the County Fiscal officer and **CANNOT** be the Project Director or Project Coordinator.
- **Model and best practice Programs:** The Office of Juvenile Justice and Delinquency Prevention are good resources for research based model programs, for more information go to <http://ojjdp.ncjrs.org/programs/mpg.html>. Model and best-practice programs can also be found on the SAMHSA website: <http://www.modelprograms.samhsa.gov/> and Blueprints website: <http://www.colorado.edu/cspv/blueprints/>.

Section 2: Budget:

- Personnel are positions hired directly by the county with County Aid funds.
- Consultants and Contracts are for any programs/services contracted out to individuals or agencies. **If the county does not directly run the program, but relies on a non-profit or other entity to run the entire program, the whole budget is shown as a contract. There must be a current formal contract on file between the county and the contractor. However, remember the county is still fiscally responsible and must insure all funds are being spent properly by the contacted programs/services.**
- Program related travel done by personnel hired by the county and paid with County Aid funds should be shown in the Travel category. Travel done by a contracting agency should be included in the lump sum contract cost and shown under Consultant/Contract category.
- Supplies and Operating for a county run program should be shown here. Supplies and Operating used by a contracting agency should be included in their contract cost and shown in the Consultants/Contracts category. The Crime Commission rules do not allow grant

funds to be used for indirect operating costs, for example, a percentage of existing costs for rent, utilities, maintenance, bookkeeping, etc.

- Equipment costs **MUST** be necessary to the program. Equipment items under \$300 should be included in Supplies. All equipment must remain county property.
- Counties contributing the required match directly to the proposed program should show the match in the appropriate categories. Counties showing match as current county juvenile expenditures should show the match in the "Other" category.
- Budget narratives are required for all areas in which funds or match are documented

Category A - Personnel

Personnel refers to wages and fringe benefits for regular full-time or part-time salaried employees as well as in-kind contributions of volunteers. Other persons working on the project who are not on the regular payroll or not volunteers must be classified either as contractual or consultants. In-kind contributions, if allowable, must be listed as matching funds.

Salaries may not exceed those normally paid for comparable positions in the community and/or the unit of government.

1. **Direct Salaries.** Write in the title or position of each employee who will be involved in the project, including new positions to be filled, and the number of volunteers, if applicable. If existing personnel will be involved in the project but no funds will be requested for their position and their salaries will not be used as match, do not list them on the budget page, but do include such information in the Budget and Project Narrative. Across from each position listed, enter the annual salary of the position; percent of the time to be devoted to the project; amount of funds being requested for the position; the amount of matching funds; and, the total cost for the position.

At the bottom of Section 1, enter the subtotal of the amount of funds being requested, matching funds and the total of all direct salaries. To establish the value of services provided by volunteers, if applicable, use the current minimum hourly wage times the number of hours of service to be contributed.

2. **Fringe Benefits.** All fringe benefits are to be based on the employer's share only. The employee's share is to be withheld from his or her wages. Vacation and leave time would be included in normal working hours (FTE 2,080hours/year) and are not added benefits. Enter the total cost of benefits being requested and being provided as matching funds in the appropriate columns.
3. **Total Personnel Budget.** Enter the total amount of funds being requested, matching funds and total of all salaries and fringe benefits for the project. Also enter these totals on the "Budget Summary" pages.
4. **Personnel Budget Narrative.** A budget narrative **MUST** be attached if funds are requested and/or match is provided. The budget narrative **MUST** include a breakdown of how the cost for each position was determined (ex: 500 hours x \$5 an hour = \$2,500) for both the requested funds and matching funds. The budget narrative is to explain: 1) if each position is existing or new, and if existing how it is not supplanting; 2) if each position is full or part-time; 3) how

each position is relevant to the project; and, 4) a brief description of the duties of each position. Also include positions for which funds are not being requested or are not used as matching funds but will be involved in the project.

Category B – Consultants and Contracts

NOTE: If more than one consultant will be used for the project, please make copies of the budget sheet and complete one for each consultant.

1. **Purpose:** List the purpose for using a consultant or contractor, i.e. conduct study, facilitate support group, develop and/or present training, etc.
2. **Type of Consultant:** Check the box for the type of consultant to be used for the stated purpose.
3. **Consultant Fees:** Consultants employed by commercial and not-for-profit organizations are subject to competitive bidding procedures and are subject to \$450 per day or \$56.25 per hour maximum compensation. In cases where an individual has authority to consult without employer involvement, the rate of compensation should not exceed \$450 per day or \$56.25 per hour. The rate for independent consultants must be reasonable and consistent with that paid for similar services in the market place.
4. **Travel Expenses For The Consultant:**
 - (a) **Mileage:** List the cost for mileage. Enter the amount requested and the amount provided as match. Enter the total cost in the "total" column. Mileage rate is .55 cents/mile.
 - (b) **Air Fare:** List the cost for air fare (coach or least expensive class). Enter the amount requested and the amount provided as match. Enter the total cost in the "total" column.
 - (c) **Meals:** List the cost for meals. Enter the amount requested and the amount provided as match. Meal allowance for Nebraska is \$41 (\$7 for breakfast, \$11 for lunch, \$23 for dinner, and \$3 for incidentals). Enter the total cost in the "total" column.
 - (d) **Lodging:** List the cost for lodging. Enter the amount requested and enter the amount provided as match. Enter the total cost in the "total" column. Nebraska lodging allowance is \$70.00 per night (\$101.00 for Omaha).
 - (e) **Other Costs:** List other anticipated costs associated with the consultant. Enter the amount requested and the amount provided as match. Enter the total cost in the "total" column.
 - (f) For out of state meal and lodging rates go to www.gsa.gov and click on per diem rates.
5. **Total Cost:** Calculate the total cost for funds requested, match provided and total cost. Enter totals on the "Budget Summary" page.
6. **Budget Narrative:** A budget narrative is to be attached if funds are being requested and/or if match funds are being provided. The budget narrative is to include a breakdown of how the cost for each consultant was determined for both the funds being requested and the matching funds. The budget narrative is to explain what services and/or what product the consultant will provide; how the services or product relate to the project and the impact on the project.

Category C – Travel Expenses

NOTE: If travel expenses are needed for more than one purpose, please make a copy of the budget sheet and complete one for each purpose.

Purpose: List travel expenses by purpose (ex: training, conference, daily travel for job, etc.) For example, a project coordinator will attend training. Enter "training" on the line marked "Purpose". Complete all the applicable expenses associated with this purpose (any mileage that will be paid, air fare, meals, lodging, other.)

1. Mark the travel as local, in-state, or out-of-state.
2. List the title of the person who will travel.
3. Calculate the cost of the travel, completing the areas relevant to the travel for each purpose.
 - (a) **Mileage:** Calculate the number of miles of annual travel and multiply by .55 cents to determine the total mileage cost. Enter the amount requested and the amount provided as match. Enter the total cost in the "total" column.
 - (b) **Air Fare:** List the destination. Enter the amount requested and the amount provided as match. Enter the anticipated total cost of the air fare in the "total" column. Air fare must be "coach" or least expensive class.
 - (c) **Meals:** List the cost for meals. Enter the amount requested and the amount provided as match. Meal allowance for in state is \$41 (\$7 for breakfast, \$11 for lunch, \$23 for dinner, and \$3 for incidentals). Enter the total cost in the "total" column.
 - (d) **Lodging:** List the number of nights lodging is needed and multiply by the allowable per diem rate. In-state lodging allowance is \$70.00 per night (\$101.00 for Omaha). Enter the amount requested and the amount provided as match. Enter the total cost in the "total" column.
 - (e) **Other:** List other expenses, such as taxi, parking, etc. Enter the amount requested and the amount provided as match. Enter the total cost in the "total" column.
 - (f) For out of state meal and lodging per diem go to www.gsa.gov and click on per diem rates.
4. **Total Cost:** Calculate the total cost of the travel for each purpose. Calculate the total for all travel expenses for the funds requested, match and total and enter these amounts on the "Budget Summary" page.
5. **Budget Narrative:** For each purpose complete a budget narrative stating the purpose, the position which will travel and how this relates and is necessary to the project.

Category D – Supplies and Operating Expenses

1. **Supplies.** This section includes office supplies, forms, operating supplies, books, subscriptions, repair or maintenance supplies, (material which is expendable or consumed during the course of the project) and equipment items costing under \$300.

List items by type (ex: postage, forms, office supplies, training materials, etc.) along with the quantity, unit cost, and the total cost. Higher cost items should be listed separately and identified (ex: special mailings, equipment items, etc.). Enter the total cost in the "total" column. Enter the amount, if any, of the cost being requested and enter the amount of the cost that will be provided as match.

At the bottom of section 1, enter the cost for project supplies with a breakdown by the amount requested, match and total cost in the appropriate columns.

2. **Operating Expenses.** This section includes all operating expenses involving rental arrangements and purchase of non-consultant type services.

For each item listed enter the rate or unit cost. Enter the amount of the cost requested and enter the amount provided as match. Enter the total cost in the "total" column. Identify other items for which funds are requested in the "other" category.

At the bottom of section 2, enter the cost of project operating expenses. Provide a breakdown of the total cost by the amount requested, match and total costs in the appropriate columns.

3. **Total Supplies and Operating Expense Budget.** Enter the total costs for all supplies and operating expenses. Provide the breakdown of the costs by the amount requested, match and total costs in the appropriate columns. Also enter those totals on the "Budget Summary" page.

4. **Budget Narrative.** Attach a budget narrative if funds are requested or match is provided.

For supplies such as envelopes, paper and other office supplies, explain how the cost was determined. Provide a cost breakdown of how requested and match amounts were determined.

If funds are requested for operating expenses, describe current expenses and why the requested expenses are needed.

Explain how the supplies and operating expenses relate to the project.

Category E - Equipment

Purpose: Check grant programs for allowability and bidding requirements. Items requiring bids will not be funded if the grant was absent in showing that bids were taken as required by law, rule or regulation. Call the grant administrator if you have any questions.

Total Cost: Enter the total costs for the appropriate items. Provide the breakdown of the costs by the amount requested, match and total costs in the appropriate columns. (Equipment items costing under \$300.00 and should be included in Supplies.)

Enter the total costs for Equipment. Also enter these totals on the "Budget Summary" page.

Category F – Other

Purpose: List each item and the total estimated cost with the breakdown by the amount requested, match, and total costs in the appropriate columns.

Enter the total cost for “other”. Also, enter these totals on the “Budget Summary” page.

Check grant program guidelines for allowability.

Total Cost: Explain each item request and the breakdown of how the cost for each item was determined. Provide an explanation of how each item is relevant to the project.

Section 3: Community Description:

The purpose of this section is to discuss community issues that may affect juvenile programs. It is important to fill out the community description table completely. Discuss an overview of the county or counties where this project will take place. What are the current resources your county has in place for youth and what are the barriers your county faces regarding youth in your county.

Data can be found for the juvenile population on the OJJDP website at:
<http://ojjdp.ncjrs.gov/ojstatbb/default.asp>

Section 4: Problem Statement:

Provide a problem statement in the format, “The problem to be addressed by this proposed project is...” Note: The problem is never a “lack of” something. Example, Youth are getting in trouble after school in your county. The problem statement:

COULD NOT BE that there is a lack of afterschool programs in your county

COULD BE youth are getting in trouble afterschool between the hours of 3-5pm when their parents are still at work.

Provide a description of the problem stated. Explain the problem, the impact of the problem, and identify the factors that contribute to and/ or cause the problem.

Provide statistical documentation that is relevant to the problem statement. Statistics should be provided in numbers and percentages. Provide a brief description of the statistics and site where the information was gathered. Note: statistical documentation is not opinions from members of the community.

Describe how the Comprehensive Juvenile Services Plan relates to the problem statement. Which priorities does the problem fall under and how do those priorities relate to the problem statement.

Section 5: Program Description:

Answer each question completely. Explain whether this project has been previously funded by County Aid funds or if it is a new project. Example, the last three years county aid funding has gone to the counties diversion program but this year we are also going to use a portion of the funds to start an afterschool program. The diversion program is not a new program but the afterschool program is.

Please complete the program description thoroughly, from referral (including referral sources), intake, assessments, program services, and exit from program. Explain any collaborative efforts occurring between other agencies.

Explain job duties of staff that are funded by County Aid funds. Example, what are their job responsibilities, are they full or part time, do they supervise any employees, are they in charge of writing the county's three year plan?

Section 6: Continuation Information:

Complete the data tables that apply to this application. Example, if I use County Aid funds for diversion and a mentoring program I am going to fill out a table for both diversion and mentoring. Answer each question thoroughly. Be sure to thoroughly complete the data table—this is data that should be collected for all programs.

Section 7: Memorandums of Understanding

For counties applying as a group, submit a current copy of a MOU signed by each participating county board chair confirming each county's commitment to pool their County Aid Funds to accomplish the mentioned project(s) in this application and who will be the lead county.

Section 8: Required Forms

Make sure to read all required forms carefully and have them signed by the authorized official (county board chair or if submitting for multiple counties the lead county's board chair) for the grant application.

APPLICATION FORMAT REQUIREMENTS

- Applications are to be typewritten. **The original should be stapled and 2 hole punched at the top.** The remaining copies should be stapled in the upper left hand corner (no 2 hole punch required). Submit 15 copies to the Crime Commission.
- If the applicant re-creates the application on their computer, the application format and layout is to be exactly (word for word and design) as the Crime Commission's official application. Please note that changes in the Crime Commission application change from year to year.
- Remove grant instructions from your final application submitted.
- Application should be single spaced, 1" margins, 12pt. font, and narrative pages numbered.
- Additional information in the form of Appendixes will not be accepted.
- Do not complete a narrative for the Budget Summary Page. Provide budget narratives for each detailed budget section completed.
- Include ALL required forms with appropriate signatures. County Board Chair is the authorized signature.
- Budget figures are to be provided in round numbers, no cents.
- Adhere to the page limits listed for each section of the grant application.
- Budget pages not relevant to the project do not need to be submitted with the grant application.
- The grant may be copied double sided
- **FOLLOW ALL DIRECTIONS OF GRANT APPLICATION.**

County Formulated Amounts for County Aid Grant Funding

	12-18 Pop. (2000)	% of Total Population	Allotment	Required Match	County Totals
Adams	3,156	1.70%	\$25,441	\$10,176	\$35,617
Antelope	975	0.53%	\$7,860	\$3,144	\$11,004
Arthur	52	0.03%	\$419	\$168	\$586
Banner	115	0.06%	\$927	\$371	\$1,297
Blaine	73	0.04%	\$588	\$235	\$823
Boone	810	0.44%	\$6,529	\$2,612	\$9,140
Box Butte	1,505	0.81%	\$12,132	\$4,853	\$16,984
Boyd	308	0.17%	\$2,483	\$993	\$3,476
Brown	412	0.22%	\$3,321	\$1,328	\$4,649
Buffalo	4,672	2.52%	\$37,662	\$15,065	\$52,726
Burt	890	0.48%	\$7,174	\$2,870	\$10,043
Butler	1,096	0.59%	\$8,835	\$3,534	\$12,369
Cass	2,739	1.48%	\$22,079	\$8,832	\$30,910
Cedar	1,259	0.68%	\$10,149	\$4,060	\$14,208
Chase	491	0.27%	\$3,958	\$1,583	\$5,541
Cherry	712	0.38%	\$5,739	\$2,296	\$8,034
Cheyenne	1,141	0.62%	\$9,198	\$3,679	\$12,877
Clay	923	0.50%	\$7,440	\$2,976	\$10,416
Colfax	1,222	0.66%	\$9,851	\$3,940	\$13,791
Cuming	1,216	0.66%	\$9,802	\$3,921	\$13,722
Custer	1,332	0.72%	\$10,737	\$4,295	\$15,031
Dakota	2,332	1.26%	\$18,799	\$7,520	\$26,318
Dawes	1,020	0.55%	\$8,222	\$3,289	\$11,510
Dawson	2,684	1.45%	\$21,636	\$8,654	\$30,290
Deuel	258	0.14%	\$2,080	\$832	\$2,912
Dixon	782	0.42%	\$6,304	\$2,522	\$8,825
Dodge	3,831	2.07%	\$30,882	\$12,353	\$43,234
Douglas	47,518	25.66%	\$383,048	\$153,219	\$536,267
Dundy	252	0.14%	\$2,031	\$812	\$2,843
Fillmore	812	0.44%	\$6,546	\$2,618	\$9,164

Franklin	396	0.21%	\$3,192	\$1,277	\$4,468
Frontier	405	0.22%	\$3,265	\$1,306	\$4,571
Furnas	567	0.31%	\$4,571	\$1,828	\$6,399
Gage	2,405	1.30%	\$19,387	\$7,755	\$27,141
Garden	250	0.14%	\$2,015	\$806	\$2,821
Garfield	214	0.12%	\$1,725	\$690	\$2,415
Gosper	235	0.13%	\$1,894	\$758	\$2,651
Grant	126	0.07%	\$1,016	\$406	\$1,422
Greeley	321	0.17%	\$2,588	\$1,035	\$3,623
Hall	5,559	3.00%	\$44,812	\$17,925	\$62,736
Hamilton	1,166	0.63%	\$9,399	\$3,760	\$13,158
Harlan	406	0.22%	\$3,273	\$1,309	\$4,582
Hayes	141	0.08%	\$1,137	\$455	\$1,591
Hitchcock	364	0.20%	\$2,934	\$1,174	\$4,107
Holt	1,455	0.79%	\$11,729	\$4,692	\$16,420
Hooker	97	0.05%	\$782	\$313	\$1,094
Howard	817	0.44%	\$6,586	\$2,634	\$9,220
Jefferson	860	0.46%	\$6,933	\$2,773	\$9,706
Johnson	494	0.27%	\$3,982	\$1,593	\$5,574
Kearney	803	0.43%	\$6,473	\$2,589	\$9,062
Keith	1,034	0.56%	\$8,335	\$3,334	\$11,669
Keya Paha	84	0.05%	\$677	\$271	\$947
Kimball	460	0.25%	\$3,708	\$1,483	\$5,191
Knox	1,075	0.58%	\$8,666	\$3,466	\$12,132
Lancaster	23,655	12.78%	\$190,686	\$76,274	\$266,960
Lincoln	3,814	2.06%	\$30,745	\$12,298	\$43,043
Logan	107	0.06%	\$863	\$345	\$1,208
Loup	92	0.05%	\$742	\$297	\$1,038
Madison	4,123	2.23%	\$33,236	\$13,294	\$46,530
McPherson	70	0.04%	\$564	\$226	\$789
Merrick	958	0.52%	\$7,723	\$3,089	\$10,812
Morrill	701	0.38%	\$5,651	\$2,260	\$7,911
Nance	513	0.28%	\$4,135	\$1,654	\$5,789

Nemaha	847	0.46%	\$6,828	\$2,731	\$9,559
Nuckolls	602	0.33%	\$4,853	\$1,941	\$6,794
Otoe	1,726	0.93%	\$13,913	\$5,565	\$19,478
Pawnee	298	0.16%	\$2,402	\$961	\$3,362
Perkins	400	0.22%	\$3,224	\$1,290	\$4,513
Phelps	1,084	0.59%	\$8,738	\$3,495	\$12,233
Pierce	1,052	0.57%	\$8,480	\$3,392	\$11,872
Platte	3,889	2.10%	\$31,350	\$12,540	\$43,890
Polk	631	0.34%	\$5,087	\$2,035	\$7,121
Red Willow	1,240	0.67%	\$9,996	\$3,998	\$13,994
Richardson	1,123	0.61%	\$9,053	\$3,621	\$12,674
Rock	206	0.11%	\$1,661	\$664	\$2,325
Saline	1,544	0.83%	\$12,446	\$4,978	\$17,424
Sarpy	14,029	7.58%	\$113,089	\$45,236	\$158,324
Saunders	2,329	1.26%	\$18,774	\$7,510	\$26,283
Scotts Bluff	3,994	2.16%	\$32,196	\$12,878	\$45,074
Seward	1,940	1.05%	\$15,639	\$6,256	\$21,894
Sheridan	729	0.39%	\$5,877	\$2,351	\$8,227
Sherman	356	0.19%	\$2,870	\$1,148	\$4,018
Sioux	162	0.09%	\$1,306	\$522	\$1,828
Stanton	862	0.47%	\$6,949	\$2,780	\$9,728
Thayer	621	0.34%	\$5,006	\$2,002	\$7,008
Thomas	90	0.05%	\$725	\$290	\$1,015
Thurston	1,017	0.55%	\$8,198	\$3,279	\$11,477
Valley	499	0.27%	\$4,022	\$1,609	\$5,630
Washington	2,209	1.19%	\$17,807	\$7,123	\$24,929
Wayne	1,117	0.60%	\$9,004	\$3,602	\$12,605
Webster	395	0.21%	\$3,184	\$1,274	\$4,457
Wheeler	107	0.06%	\$863	\$345	\$1,208
York	1,695	0.92%	\$13,664	\$5,466	\$19,129
Totals	185,148	100.00%	\$1,492,500.00	\$597,000	\$2,089,500.00